# L2100038456

(Requestor's Name)	
(Address)	—
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	



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Office Use Only

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To: lillie. Keevin@bos.myfbrida.com I, Eglis Mingle, am the authorized representative for Vous Hisey Van Lines, INC: 120000019264 Tam releasing the name thru the tradeing #100366857811 Reflir Mingto Egus mingle

Subscribed and sworn before me State of Colorado this	in the county of Denver,day of	
Notany's Official Signature		any
Commission Expiration		PAOLA PANTOJA MOTARY PUBLIC STATE OF COLORADO NOTARY ID 20204003864 MY COMMISSION EDURES GR/JA/MSM

### **COVER LETTER**

TO:	New Filing Section Division of Corporations		
	·		
SUB	JECT: Van Hisey Van Lines LLC (Name of I	Resulting Florida Limi	ted Company)
		_	ion, and fees are submitted to convert an "Other y" in accordance with s. 605.1045, F.S.
Pleas	e return all correspondence concern	ing this matter to:	
Benja	min R Mingle		
	(Contact Person)		-
<del></del>	(Firm/Company)		-
5930	SW 36 Terrace		_
	(Address)		-
Fort L	auderdale , FL 33312		
	(City, State and Zip Code	:)	-
vanhis	seyvanlines@gmail.com		
E-r	mail Address: (to be used for future annual	report notifications)	-
For fi	arther information concerning this n	natter, please call:	
Eglis I	Mingle	at ( <sup>954</sup>	8027708
	(Name of Contact Person)		(Daytime Telephone Number)
	sed is a check for the following ames and drawn on a bank located in the	•	processed by this office must be payable in US
(\$25 fc <b>&amp; \$</b> 125	50.00 Filing Fees or Conversion and Certificate of Status  Status	s \$180.00 Filing and Certified Cop	
	Mailing Address: New Filing Section Division of Corporations		Street Address: New Filing Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

 $\label{eq:continuous_problem} \left( \left( \mathbf{x}_{1}, \dots, \mathbf{x}_{n} \right) \right) = \left( \mathbf{x}_{1}, \dots, \mathbf{x}_{n} \right) = \left( \mathbf{x}_{1}, \dots, \mathbf{x}_{n} \right)$ 

# **Articles of Conversion**

For

# "Other Business Entity"

nto

# Florida Limited Liability Company



The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Flori Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Convers Van Hisey Van Lines Incorporated	ion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or busines	is trust, et
First organized, formed or incorporated under the laws of	
i :	intry)
on - 2/20/20	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organ Van Hisey Van Lines LLC	ization:
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:  5/27/2021	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar date date this document is filed by the Florida Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	•
5. The plan of conversion has been approved in accordance with all applicable statutes.	

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 27	day of May	20
Signature of Autho	rized Representative of	imited Liability Company:
Signature of Authori Printed Name: Eglis M	zed Representative:	Eglis Mig.lu  Title: President
Signature(s) on beha	alf of Other Business Enti	<u>y:</u> [See below for required signatu
Signature:	elis Migle	e Title: Prosiden
Signatura	P. LALA	·
Printed Name:	5 cryan rom	VAL Title: acquit
Printed Name:	<u> </u>	Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
If Directors or Office If Florida General P Signature of one Gen If Florida Limited P	n, Vice Chairman, Directors have not been selected, a sartnership or Limited Lieral Partner.  artnership or Limited Lieral Partner.	n Incorporator must sign.
Signatures of <u>ALL</u> G	eneral Partners.	
All others: Signature of an autho	rized person.	
Fees:		
<del></del>		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Van Hisey Van Lines	LLC		
<del></del>		ability Company. "L.L.C.," or "LLC.")	
ARTICLE II - Ad	dress:		
The mailing address	s and street address of th	e principal office of the Limited Liab	ility Company
Principal Office A	ddress:	Mailing Address:	
5930 SW 36 Terrace	<b>:</b>	5930 SW 36 Terrace	
Fort Lauderdale, FL:	33312	Fort Lauderdale, FL 33312	
ARTICLE III - Re	egistered Agent, Registe	ered Office, & Registered Agent's S	ignature: 9
ARTICLE III - Re The Limited Liability Co business entity with an a	egistered Agent, Registermany cannot serve as its own Rective Florida registration.)	ered Office, & Registered Agent's S tegistered Agent. You must designate an individual	lignature:
ARTICLE III - Re The Limited Liability Co business entity with an a	egistered Agent, Registermany cannot serve as its own Rective Florida registration.)	ered Office, & Registered Agent's S Registered Agent. You must designate an individual	Signature:
ARTICLE III - Re The Limited Liability Co business entity with an a	Benjamin R Mingle	ered Office, & Registered Agent's S Legistered Agent. You must designate an individual he registered agent are:	Signature:
ARTICLE III - Re The Limited Liability Co business entity with an a The name and the F	Benjamin R Mingle	ered Office, & Registered Agent's S legistered Agent. You must designate an individual he registered agent are:	Signature:
ARTICLE III - Re The Limited Liability Co business entity with an a	Benjamin R Mingle		Signature:
ARTICLE III - Re The Limited Liability Co business entity with an a	N Senjamin R Mingle N Senj		lignature:
	N Senjamin R Mingle N Senj	ame	lignature:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

## **ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
President	Eglis Mingle
	5930 SW 36 Terrace
	Fort Lauderdale FL 33312
Secretary	Robert Kesten
	5930 SW 36 Теггасе
	Fort lauderdale FL 33312
<del></del>	
(Use attachment if necessary)	
<b>,</b>	
ARTICLE V: Other provisions, if any.	
THE TODE VE Outer provisions, it way.	
<del></del>	
	<del></del>
<b>REQUIRED SIGNATURE:</b>	
REQUIRED SIGNATURE.	Eglis Mugle
	Eghs or (agu
Signatura of a mambay as a	
	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that
	nent to the Department of State constitutes a third degree felony
as provided for in s.817.155, F.S.	ioni o dia dapatria di dia da di
Eglis Mingle	
Тур	oed or printed name of signee
	Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)